

# Student Health And Risk Prevention



Prevention Needs Assessment (PNA)  
Results for 2003

## Northeastern DSAMH District Profile Report

Utah Department of Human Services, Division of  
Substance Abuse and Mental Health (DSAMH)

State of Utah  
Department of  
Human Services

Division of  
Substance Abuse  
and Mental Health

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# Introduction

## 2003 DSAMH District Prevention Needs Assessment Survey Report

This report summarizes the findings from the Utah 2003 Prevention Needs Assessment (PNA) Survey that was conducted as part of the Student Health and Risk Prevention (SHARP) Statewide Survey. The survey was administered to a middle school sample (grades 6, 7, and 8) and a high school sample (grades 9, 10, 11, and 12) in 38 school districts across Utah. The results for your district are presented along with comparisons to the overall Utah State sample. The survey was designed to assess adolescent substance use, anti-social behavior, and the risk and protective factors that predict these adolescent problem behaviors. Table 1 contains the characteristics of the students who completed the survey from your district and the State of Utah. The survey was a cooperative effort of the Utah State Office of Education, Department of Health, Division of Substance Abuse and Mental Health, and Bach Harrison, L.L.C.

## Contents:

### Introduction:

- Characteristics of Participants
- Risk & Protective Factor Model of Prevention

### How to Read the Charts

### Data Charts:

- Substance Use & Antisocial Behavior
- Risk & Protective Factor Profiles

### Risk and Protective Factor Definitions

### Tools for Assessment and Planning

### Data Tables

### Contacts for Prevention

## The Risk and Protective Factor Model of Prevention

Many states and local agencies have adopted the Risk and Protective Factor Model to guide their prevention efforts. The Risk and Protective Factor Model of Prevention is based on the simple premise that to prevent a problem from happening, we need to identify the factors that increase the risk of that problem developing and then find ways to reduce the risks. Just as medical researchers have found risk factors for heart disease such as diets high in fat, lack of exercise, and smoking; a team of researchers at the University of Washington have defined a set of risk factors for youth problem behaviors. Risk factors are characteristics of school, community, and family environments, as well as characteristics of students and their peer groups that are known to predict increased likelihood of drug use, delinquency, school dropout, teen pregnancy, and violent behavior among youth. Dr. J. David Hawkins, Dr. Richard F. Catalano, and their colleagues at the University of Washington, Social Development Research Group have investigated the relationship between risk and protective factors and youth problem behavior. For example, they have found that children who live in families with high levels of conflict are more likely to become involved in problem behaviors such as delinquency and drug use than children who live in families with low levels of family conflict. Protective factors exert a positive influence or buffer against the negative influence of risk, thus reducing the likelihood that adolescents will engage in problem behaviors. More information on the Risk and Protective Factor Model can be found in this report after the definitions of the risk and protective factor scales under *Additional Information on Risk and Protective Factors*.

**Table 1. Characteristics of Participants**

Year of Survey	2003			
	District		State	
	Number	Percent	Number	Percent
<b>Total Students</b>	388	100	13706	100
<b>Grade</b>				
Middle (6,7 & 8)	246	63.4	7562	55.2
High (9,10,11 & 12)	142	36.6	6144	44.8
<b>Gender</b>				
Male	172	45.0	6428	47.3
Female	210	55.0	7176	52.7
<b>Ethnicity</b>				
White	325	84.6	10869	81.0
Native American	37	9.6	347	2.6
Hispanic	7	1.8	1133	8.4
African American	1	0.3	187	1.4
Asian	2	0.5	138	1.0
Pacific Islander	1	0.3	115	0.9

## How to Read the Charts in this Report

There are three types of charts presented in this report: 1) substance use and antisocial behavior charts, 2) risk factor charts, and 3) protective factor charts. All the charts show the results from the 2003 PNA Survey. The actual percentages from the charts are presented in a table format at the end of this report.

### Substance Use and Antisocial Behavior Charts

This report contains information about alcohol, tobacco and other drug use (referred to as ATOD use throughout the report) and other problem behaviors of students. The bars on each chart represent the percentage of students in the selected grades who reported the behavior. For example, for the overall state, approximately 37 percent of students in high school reported that they 'ever used alcohol'. This means that 37 percent of the high school students reported that they had tried alcohol at least once in their lifetime. The four sections in the charts represent different types of problem behaviors. The definitions of each of the types of behavior are provided below.

- **Ever-used** is a measure of the percentage of students who tried the particular substance at least once in their lifetime and is used to show the level of experimentation with a particular substance.
- **30-day use** is a measure the percentage of students who used the substance at least once in the 30 days prior to taking the survey and is a more sensitive indication of the level of current use of the substance.
- **Binge drinking** (five or more drinks in a row during the two weeks prior to the survey) and **30-day use of a pack or more of cigarettes per day** are measures of heavy use of alcohol and tobacco.
- **Antisocial behavior (ASB)** is a measure of the percentage of students who report **any involvement** with the eight antisocial behaviors listed in the charts **in the past year**. In the charts, antisocial behavior will often be abbreviated as ASB.

- **Dots** are used on the charts to show the overall Utah state average for each behavior for all of the youth in middle school and high school who participated in the 2003 survey. The dots allow a community to compare the results from their youth to youth throughout the state. Information about other students in the state can be helpful in determining the seriousness of a given level of problem behavior. For example, if the percentage of students in your community engaging in a problem behavior is significantly higher than the state average, it is most likely that an intervention is needed.

### Risk and Protective Factor Charts

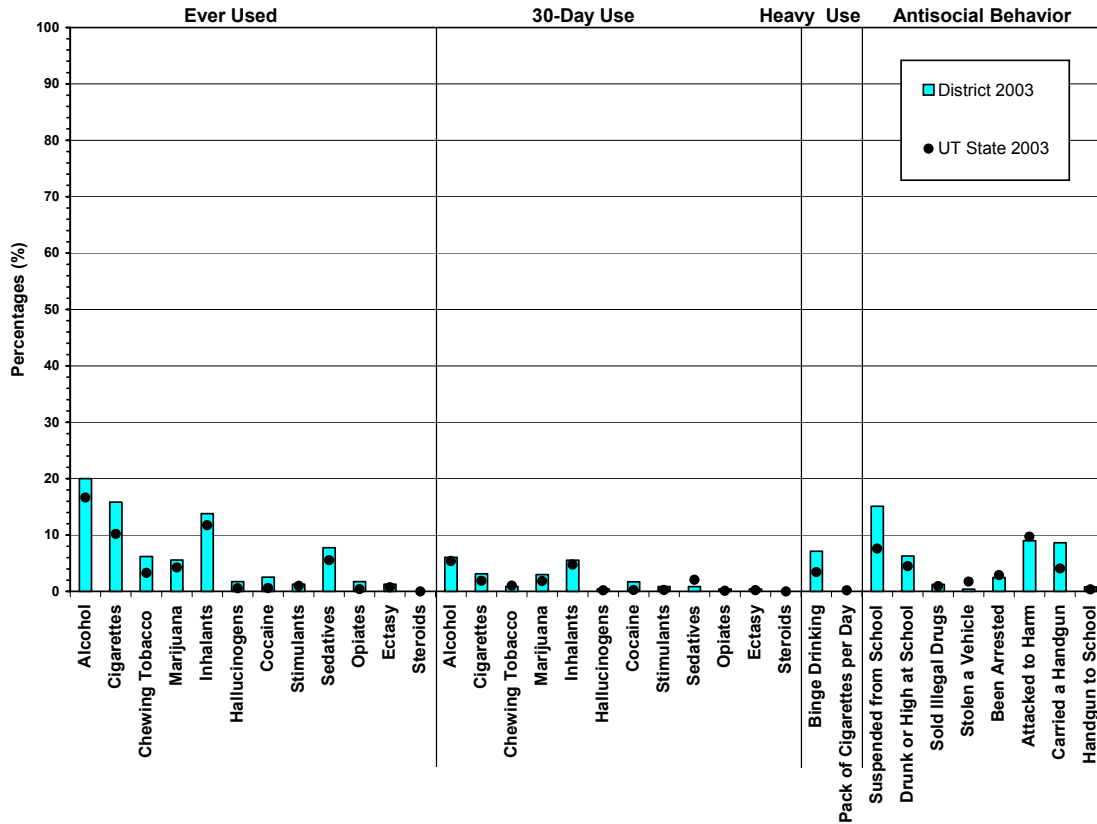
In order to make the results of the 2003 PNA Survey more useable, risk and protective profiles were developed that show the percentage of youth at risk and the percentage of youth with protection on each scale. The profiles allow comparisons between the results from your district, the overall state shown by dots, and a more national sample shown by the dashed line. As with the Substance Use and Antisocial Behavior Charts, the dots show the overall average of all youth who were surveyed in Utah. The dashed line on each risk and protective factor chart represents the percentage of youth at risk or with protection for the seven-state sample upon which the cut-points were developed. The seven states included in the norm group were Colorado, Illinois, Kansas, Maine, Oregon, Utah, and Washington. All the states have a mix of urban and rural students. Additional information about the cut-points, dots, and dashed lines can be found in this report after the section, *Tools for Assessment and Planning*.

Again, brief definitions of the risk and protective factor scales are provided following the profile charts.

For more information about risk and protective factors, please refer to the resources listed on the last page of this report under Contacts for Prevention.

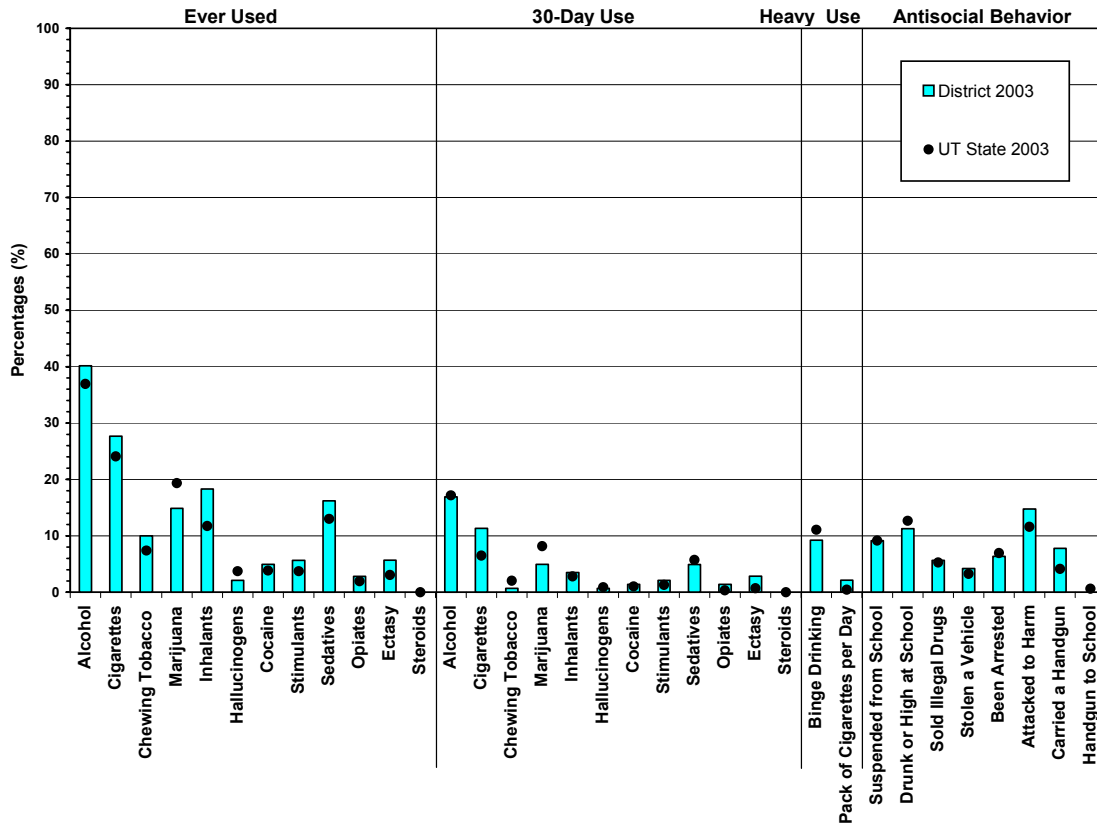
## ATOD USE AND ANTISOCIAL BEHAVIOR

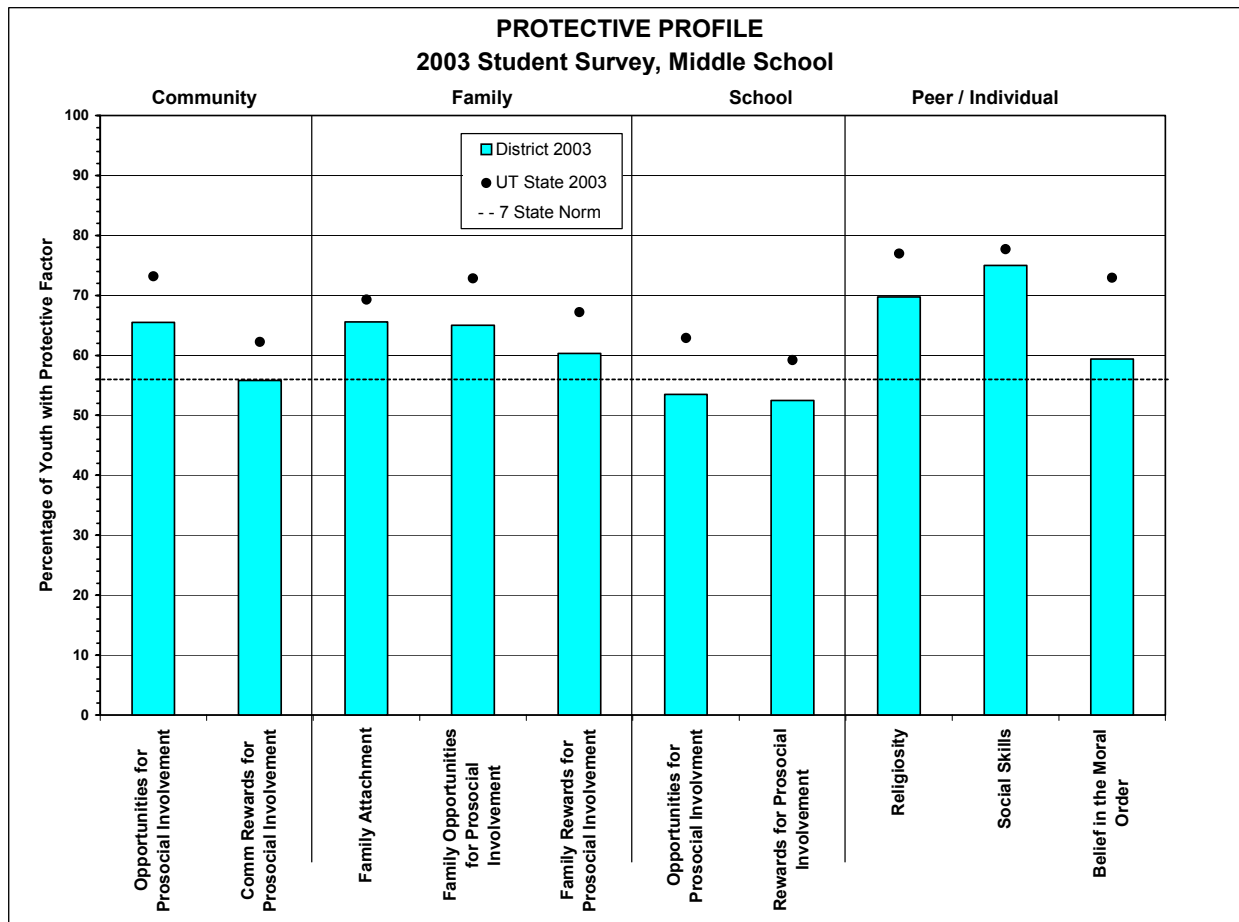
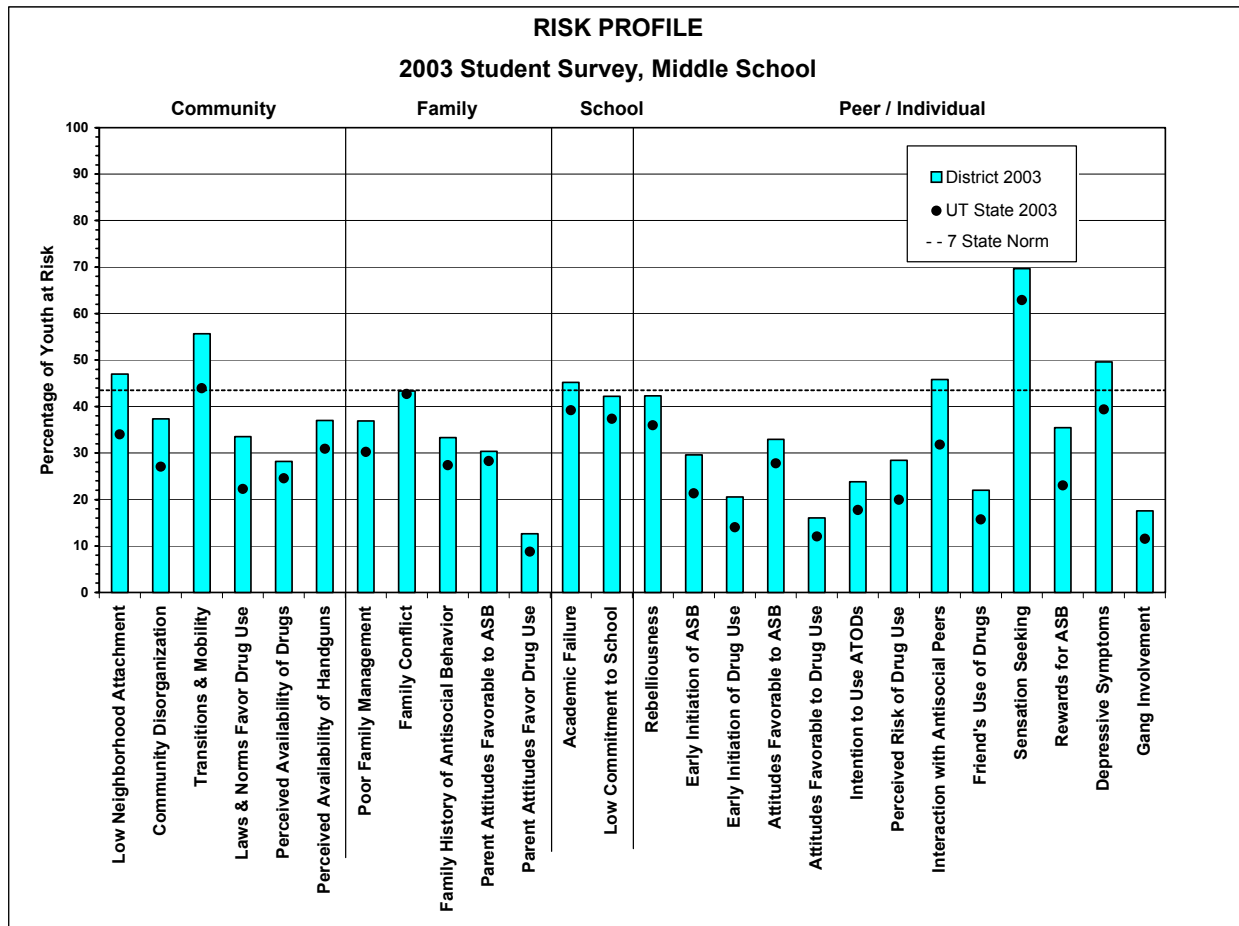
### 2003 Student Survey, Middle School

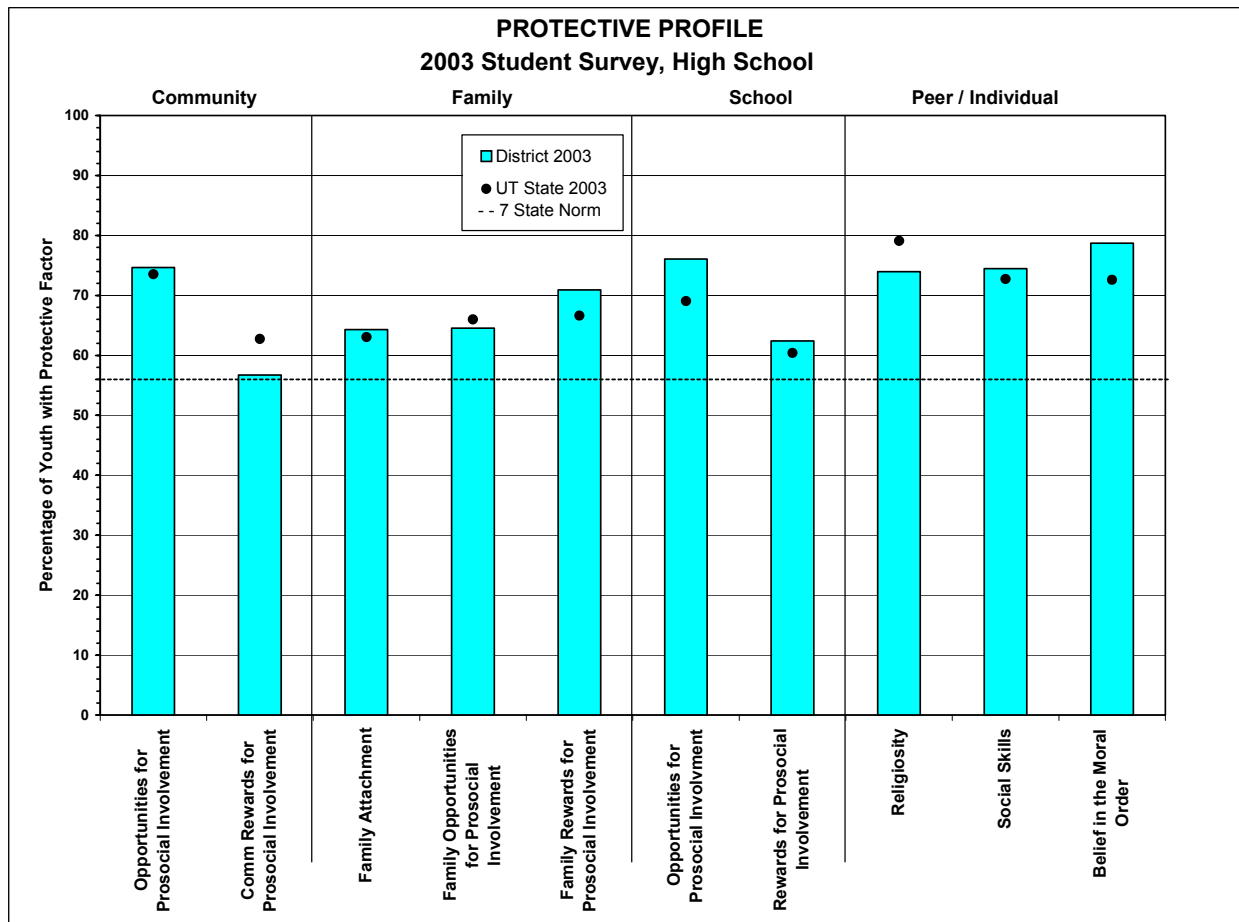
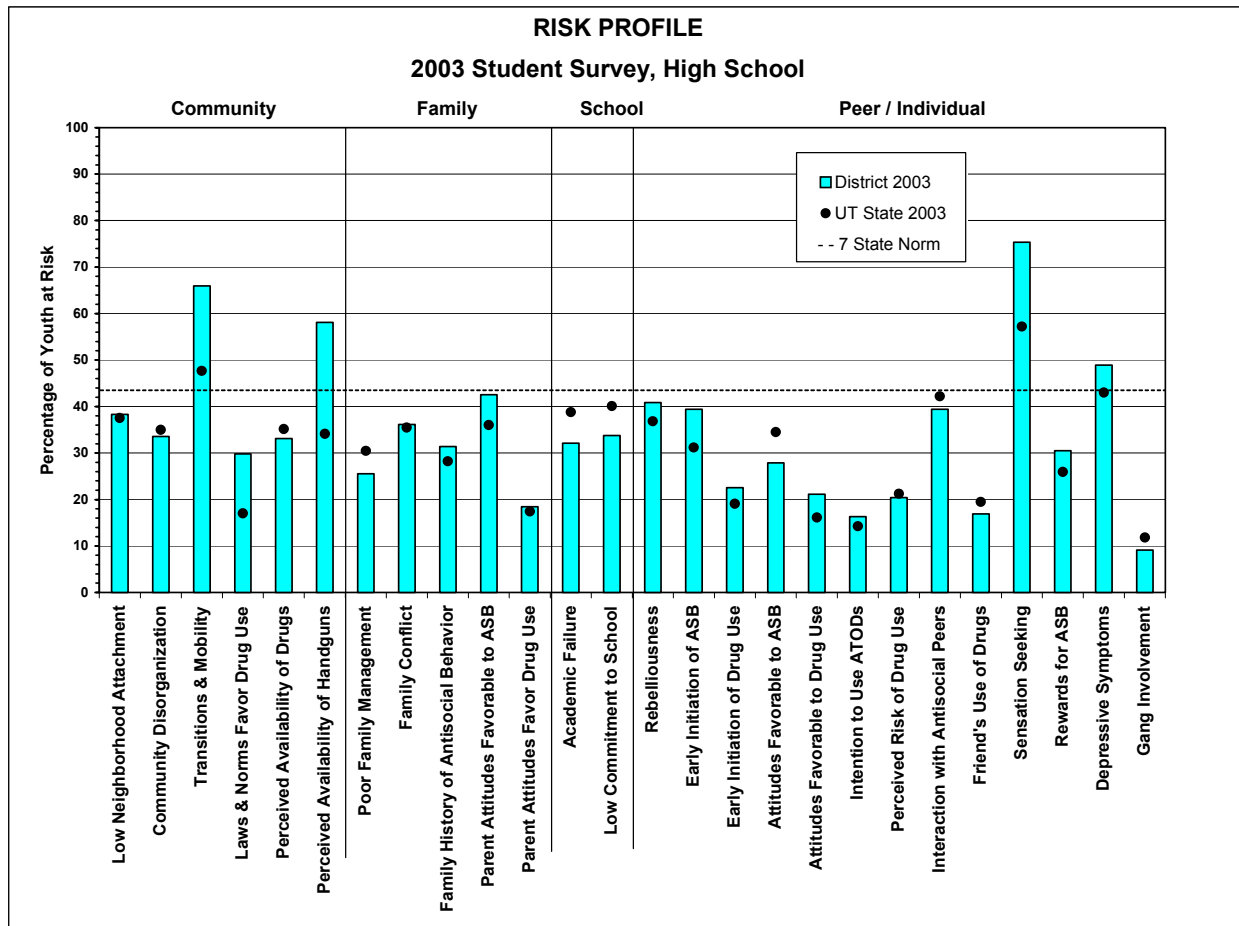


## ATOD USE AND ANTISOCIAL BEHAVIOR

### 2003 Student Survey, High School







**Table 2. Risk and Protective Factor Scale Definitions**

<b>Community Domain Risk Factors</b>	
<b>Community and Personal Transitions &amp; Mobility</b>	Neighborhoods with high rates of residential mobility have been shown to have higher rates of juvenile crime and drug selling, while children who experience frequent residential moves and stressful life transitions have been shown to have higher risk for school failure, delinquency, and drug use.
<b>Community Disorganization</b>	Research has shown that neighborhoods with high population density, lack of natural surveillance of public places, physical deterioration, and high rates of adult crime also have higher rates of juvenile crime and drug selling.
<b>Low Neighborhood Attachment</b>	A low level of bonding to the neighborhood is related to higher levels of juvenile crime and drug selling.
<b>Laws and Norms Favorable Toward Drug Use</b>	Research has shown that legal restrictions on alcohol and tobacco use, such as raising the legal drinking age, restricting smoking in public places, and increased taxation have been followed by decreases in consumption. Moreover, national surveys of high school seniors have shown that shifts in normative attitudes toward drug use have preceded changes in prevalence of use.
<b>Perceived Availability of Drugs and Handguns</b>	The availability of cigarettes, alcohol, marijuana, and other illegal drugs has been related to the use of these substances by adolescents. The availability of handguns is also related to a higher risk of crime and substance use by adolescents.
<b>Community Domain Protective Factors</b>	
<b>Opportunities for Positive Involvement</b>	When opportunities are available in a community for positive participation, children are less likely to engage in substance use and other problem behaviors.
<b>Rewards for Positive Involvement</b>	Rewards for positive participation in activities helps children bond to the community, thus lowering their risk for substance use.
<b>Family Domain Risk Factors</b>	
<b>Family History of Antisocial Behavior</b>	When children are raised in a family with a history of problem behaviors (e.g., violence or ATOD use), the children are more likely to engage in these behaviors.
<b>Family Conflict</b>	Children raised in families high in conflict, whether or not the child is directly involved in the conflict, appear at risk for both delinquency and drug use.
<b>Parental Attitudes Favorable Toward Antisocial Behavior &amp; Drugs</b>	In families where parents use illegal drugs, are heavy users of alcohol, or are tolerant of children's use, children are more likely to become drug abusers during adolescence. The risk is further increased if parents involve children in their own drug (or alcohol) using behavior, for example, asking the child to light the parent's cigarette or get the parent a beer from the refrigerator.
<b>Poor Family Management</b>	Parents' use of inconsistent and/or unusually harsh or severe punishment with their children places them at higher risk for substance use and other problem behaviors. Also Parents' failure to provide clear expectations and to monitor their children's behavior makes it more likely that they will engage in drug abuse whether or not there are family drug problems
<b>Family Domain Protective Factors</b>	
<b>Family Attachment</b>	Young people who feel that they are a valued part of their family are less likely to engage in substance use and other problem behaviors.
<b>Opportunities for Positive Involvement</b>	Young people who are exposed to more opportunities to participate meaningfully in the responsibilities and activities of the family are less likely to engage in drug use and other problem behaviors.
<b>Rewards for Positive Involvement</b>	When parents, siblings, and other family members praise, encourage, and attend to things done well by their child, children are less likely to engage in substance use and problem behaviors.
<b>School Domain Risk Factors</b>	
<b>Academic Failure</b>	Beginning in the late elementary grades (grades 4-6) academic failure increases the risk of both drug abuse and delinquency. It appears that the experience of failure itself, for whatever reasons, increases the risk of problem behaviors.

<b>Table 2. Risk and Protective Factor Scale Definitions (Continued)</b>	
<b>Low Commitment to School</b>	Surveys of high school seniors have shown that the use of hallucinogens, cocaine, heroin, stimulants, and sedatives or nonmedically prescribed tranquilizers is significantly lower among students who expect to attend college than among those who do not. Factors such as liking school, spending time on homework, and perceiving the coursework as relevant are also negatively related to drug use.
<b>School Domain Protective Factors</b>	
<b>Opportunities for Positive Involvement</b>	When young people are given more opportunities to participate meaningfully in important activities at school, they are less likely to engage in drug use and other problem behaviors.
<b>Rewards for Positive Involvement</b>	When young people are recognized and rewarded for their contributions at school, they are less likely to be involved in substance use and other problem behaviors
<b>Peer-Individual Risk Factors</b>	
<b>Early Initiation of Antisocial Behavior and Drug Use</b>	Early onset of drug use predicts misuse of drugs. The earlier the onset of any drug use, the greater the involvement in other drug use and the greater frequency of use. Onset of drug use prior to the age of 15 is a consistent predictor of drug abuse, and a later age of onset of drug use has been shown to predict lower drug involvement and a greater probability of discontinuation of use.
<b>Attitudes Favorable Toward Antisocial Behavior and Drug Use</b>	During the elementary school years, most children express anti-drug, anti-crime, and pro-social attitudes and have difficulty imagining why people use drugs or engage in antisocial behaviors. However, in middle school, as more youth are exposed to others who use drugs and engage in antisocial behavior, their attitudes often shift toward greater acceptance of these behaviors. Youth who express positive attitudes toward drug use and antisocial behavior are more likely to engage in a variety of problem behaviors, including drug use.
<b>Friends' Use of Drugs</b>	Young people who associate with peers who engage in alcohol or substance abuse are much more likely to engage in the same behavior. Peer drug use has consistently been found to be among the strongest predictors of substance use among youth. Even when young people come from well-managed families and do not experience other risk factors, spending time with friends who use drugs greatly increases the risk of that problem developing.
<b>Interaction with Antisocial Peers</b>	Young people who associate with peers who engage in problem behaviors are at higher risk for engaging in antisocial behavior themselves.
<b>Perceived Risk of Drug Use</b>	Young people who do not perceive drug use to be risky are far more likely to engage in drug use.
<b>Rewards for Antisocial Behavior</b>	Young people who receive rewards for their antisocial behavior are at higher risk for engaging further in antisocial behavior and substance use.
<b>Rebelliousness</b>	Young people who do not feel part of society, are not bound by rules, don't believe in trying to be successful or responsible, or who take an active rebellious stance toward society, are at higher risk of abusing drugs. In addition, high tolerance for deviance, a strong need for independence, and normlessness have all been linked with drug use.
<b>Sensation Seeking</b>	Young people who seek out opportunities for dangerous, risky behavior in general are at higher risk for participating in drug use and other problem behaviors.
<b>Intention to Use ATODs</b>	Many prevention programs focus on reducing the intention of participants to use ATODs later in life. Reduction of intention to use ATODs often follows successful prevention interventions.
<b>Depressive Symptoms</b>	Young people who are depressed are overrepresented in the criminal justice system and are more likely to use drugs. Survey research and other studies have shown a link between depression and other youth problem behaviors.
<b>Gang Involvement</b>	Youth who belong to gangs are more at risk for antisocial behavior and drug use.
<b>Peer-Individual Protective Factors</b>	
<b>Religiosity</b>	Young people who regularly attend religious services are less likely to engage in problem behaviors.
<b>Social Skills</b>	Young people who are socially competent and engage in positive interpersonal relations with their peers are less likely to use drugs and engage in other problem behaviors.
<b>Belief in the Moral Order</b>	Young people who have a belief in what is "right" or "wrong" are less likely to use drugs.



## Additional Information on Risk and Protective Factors

Protective factors identified through research reviewed by Drs. Hawkins and Catalano include social bonding to family, school, community and peers; healthy beliefs and clear standards for behavior; and individual characteristics. For bonding to serve as a protective influence, it must occur through involvement with peers and adults who communicate healthy values and set clear standards for behavior. Research on risk and protective factors has important implications for prevention efforts. The premise of this approach is that in order to promote positive youth development and prevent problem behaviors, it is necessary to address those factors that predict the problem. By measuring risk and protective factors in a population, prevention programs can be implemented that will reduce the elevated risk factors and increase the protective factors. For example, if academic failure is identified as an elevated risk factor in a community, then mentoring, tutoring, and increased opportunities and rewards for classroom participation can be provided to improve academic performance.

The chart at the right shows the links between the 16 risk factors and the five problem behaviors. The check marks have been placed in the chart to indicate where at least two well designed, published research studies have shown a link between the risk factor and the problem behavior.

YOUTH AT RISK	PROBLEM BEHAVIORS				
	Substance Abuse	Delinquency	Teen Pregnancy	School Drop-Out	Violence
<b>Community</b>					
Availability of Drugs and Firearms	✓				✓
Community Laws and Norms Favorable Toward Drug Use	✓				
Transitions and Mobility	✓	✓		✓	
Low Neighborhood Attachment and Community Disorganization	✓	✓			✓
Extreme Economic and Social Deprivation	✓	✓	✓	✓	✓
<b>Family</b>					
Family History of High Risk Behavior	✓	✓	✓	✓	
Family Management Problems	✓	✓	✓	✓	✓
Family Conflict	✓	✓	✓	✓	✓
Parental Attitudes and Involvement	✓	✓			✓
<b>School</b>					
Early and Persistent Antisocial Behavior	✓	✓	✓	✓	✓
Academic Failure in Elementary School	✓	✓	✓	✓	✓
Lack of Commitment to School	✓	✓	✓	✓	
<b>Individual/Peer</b>					
Alienation and Rebelliousness	✓	✓		✓	
Friends Who Engage in a Problem Behavior	✓	✓	✓	✓	✓
Favorable Attitudes Toward the Problem Behavior	✓	✓	✓	✓	
Early Initiation of the Problem Behavior	✓	✓	✓	✓	✓

# Tools for Assessment and Planning

## School and Community Improvement Using Survey Data

### Why Conduct the Prevention Needs Assessment Survey?

Data from the Prevention Needs Assessment Survey can be used to help school and community planners assess current conditions and prioritize areas of greatest need.

Each risk and protective factor can be linked to specific types of interventions that have been shown to be effective in either reducing risk(s) or enhancing protection(s). The steps outlined here will help your school and community make key decisions regarding allocation of resources, how and when to address specific needs, and which strategies are most effective and known to produce results.

### What are the numbers telling you?

Review the charts and data tables presented in this report. Using the table below, note your findings as you discuss the following questions.

- Which 3-5 risk factors appear to be higher than you would want?
- Which 3-5 protective factors appear to be lower than you would want?
- Which levels of 30-day drug use are increasing and/or unacceptably high?
  - o Which substances are your students using the most?
  - o At which grades do you see unacceptable usage levels?
- Which levels of antisocial behaviors are increasing and/or unacceptably high?
  - o Which behaviors are your students exhibiting the most?
  - o At which grades do you see unacceptable behavior levels?

### How to decide if a rate is “unacceptable.”

- **Look across the charts** – which items stand out as either much higher or much lower than the other?
- **Compare your data with statewide, and national data** – differences of 5% between local and other data are probably significant.
- **Determine the standards and values held within your community** – For example: Is it acceptable in your community for 10% of high school students to drink alcohol regularly even when the statewide percentage is 16%?

### Use these data for planning.

- **Substance use and antisocial behavior data** – raise awareness about the problems and promote dialogue
- **Risk and protective factor data** – identify exactly where the community needs to take action
- **Promising approaches** – access resources listed on the last page of this report for ideas about programs that have proven effective in addressing the risk factors that are high in your community, and improving the protective factors that are low

### MEASURE

Risk Factors  
Protective Factors  
Substance Use  
Antisocial Behaviors

Unacceptable Rate #1	Unacceptable Rate #2	Unacceptable Rate #3	Unacceptable Rate #4

## Additional Information on Cut-Points, Dots, and Dashed Lines

There are three components of the ATOD use, risk factor, and protective factor charts that are key to understanding the information that the charts contain: 1) the cut-points for the risk and protective factor scales, 2) the dots that indicate the state values, and 3) the dashed lines that indicate a more “national” value.

### Cut-Points

Before the percentage of youth at risk on a given scale could be calculated, a scale value or cut-point needed to be determined that would separate the at-risk group from the not at-risk group. The Prevention Needs Assessment (PNA) survey was designed to assess adolescent substance use, anti-social behavior, and the risk and protective factors that predict these adolescent problem behaviors. Since PNA surveys had been given to over 200,000 youth nationwide, it was possible to select two groups of youth, one that was more at risk for problem behaviors and another group that was less at risk. A cut-point score was then determined for each risk and protective factor scale that best divided the youth from the two groups into their appropriate group, more at-risk or less at-risk. The criteria for separating youth into the more at-risk and the less at-risk groups included academic grades (the more at-risk group received “D” and “F” grades, the less at-risk group received “A” and “B” grades), ATOD use (the more at-risk group had more regular use, the less at-risk group had no drug use and use of alcohol or tobacco on only a few occasions), and antisocial behavior (the more at-risk group had two or more serious delinquent acts in the past year, the less at-risk group had no serious delinquent acts).

The cut-points that were determined by analyzing the results of the more at-risk and less at-risk groups will remain constant and will be used to produce the profiles for future surveys.

Since the cut-points for each scale will remain fixed, the percentage of youth above the cut-point

on a scale (at-risk) will provide a method for evaluating the progress of prevention programs over time. For example, if the percentage of youth at risk for family conflict in a community prior to implementing a community-wide family/parenting program was 60% and then decreased to 45% one year after the program was implemented, the program would be viewed as helping to reduce family conflict.

### Dots

The dots on the charts represent the percentage of all of the youth surveyed in Utah who reported ATOD use, anti-social behavior, ‘elevated risk’ or ‘elevated protection’. The comparison to the overall state-wide results provides additional information for your community in determining the relative importance of levels of substance use, anti-social behavior and risk and protective factors. Scanning across the charts, you can easily determine which levels are most (or least) prevalent for your community. This is the first step in identifying the levels of ATOD use, anti-social behavior, risk, and protection that are operating in your community and which factors your community may choose to address.

### Dashed Line

Levels of risk and protection in your community also can be compared to a more national sample. The dashed line on each risk and protective factor chart represents the percentage of youth at risk or with protection for the seven state sample upon which the cut-points were developed. The seven states included in the norm group were Colorado, Illinois, Kansas, Maine, Oregon, Utah, and Washington. All the states have a mix of urban and rural students.

**Table 3. Number of Students Who Completed the Survey**

	Middle School		High School	
Year Survey Completed	District 2003	State 2003	District 2003	State 2003
Number of Youth	246	7562	142	6144

**Table 4. Percentage of Students Who Used ATODs During Their Lifetime**

	Middle School		High School	
Drug Used	District 2003	State 2003	District 2003	State 2003
Alcohol	20.00	16.66	40.14	36.91
Cigarettes	15.84	10.19	27.66	24.06
Chewing Tobacco	6.22	3.30	10.00	7.40
Marijuana	5.58	4.23	14.89	19.35
Inhalants	13.79	11.74	18.31	11.74
Hallucinogens	1.72	0.55	2.11	3.74
Cocaine	2.56	0.60	4.96	3.83
Stimulants	1.28	0.98	5.63	3.74
Sedatives	7.76	5.54	16.20	13.01
Opiates	1.74	0.41	2.82	1.96
Ectasy	1.30	0.75	5.67	3.07
Steroids	0.00	0.00	0.00	0.00
Any Drug	18.61	17.39	30.00	29.47

**Table 5. Percentage of Students Who Used ATODs During the Past 30 Days**

	Middle School		High School	
Drug Used	District 2003	State 2003	District 2003	State 2003
Alcohol	6.06	5.38	16.90	17.19
Cigarettes	3.13	1.89	11.35	6.48
Chewing Tobacco	0.90	1.04	0.71	2.02
Marijuana	2.99	1.84	4.96	8.15
Inhalants	5.53	4.76	3.52	2.81
Hallucinogens	0.43	0.20	0.71	0.90
Cocaine	1.71	0.26	1.41	1.05
Stimulants	0.87	0.26	2.11	1.31
Sedatives	0.85	2.07	4.93	5.73
Opiates	0.43	0.11	1.41	0.31
Ectasy	0.43	0.21	2.84	0.72
Steroids	0.00	0.00	0.00	0.00
Any Drug	8.73	7.89	12.06	13.65

**Table 6. Percentage of Students With Heavy Use of Alcohol and Cigarettes**

	Middle School		High School	
Drug Used	District 2003	State 2003	District 2003	State 2003
Binge Drinking	7.14	3.45	9.22	11.08
Pack of Cigarettes per Day	0.00	0.19	2.13	0.45

**Table 7. Percentage of Students With Antisocial Behavior in the Past Year**

<b>Behavior</b>	<b>Middle School</b>		<b>High School</b>	
	<b>District 2003</b>	<b>State 2003</b>	<b>District 2003</b>	<b>State 2003</b>
Suspended from School	15.10	7.62	9.15	9.15
Drunk or High at School	6.28	4.47	11.27	12.67
Sold Illegal Drugs	1.24	0.93	5.63	5.30
Stolen a Vehicle	0.41	1.75	4.23	3.24
Been Arrested	2.46	2.89	6.34	6.94
Attacked to Harm	9.02	9.73	14.79	11.61
Carried a Handgun	8.64	4.07	7.80	4.12
Handgun to School	0.82	0.36	0.00	0.63

**Table 8. Percentage of Students Reporting Risk**

<b>Risk Factor</b>	<b>Middle School</b>		<b>High School</b>	
	<b>District 2003</b>	<b>State 2003</b>	<b>District 2003</b>	<b>State 2003</b>
<b>Community Domain</b>				
Low Neighborhood Attachment	46.98	33.98	38.30	37.54
Community Disorganization	37.38	27.06	33.57	34.97
Transitions & Mobility	55.66	43.95	65.96	47.65
Laws & Norms Favor Drug Use	33.49	22.26	29.79	17.04
Perceived Availability of Drugs	28.18	24.56	33.09	35.19
Perceived Availability of Handguns	36.99	30.92	58.09	34.13
<b>Family Domain</b>				
Poor Family Management	36.90	30.24	25.53	30.45
Family Conflict	43.32	42.68	36.17	35.51
Family History of Antisocial Behavior	33.33	27.36	31.43	28.24
Parent Attitudes Favorable to ASB	30.39	28.29	42.55	36.01
Parent Attitudes Favor Drug Use	12.62	8.79	18.44	17.41
<b>School Domain</b>				
Academic Failure	45.23	39.20	32.14	38.80
Low Commitment to School	42.21	37.38	33.80	40.08
<b>Peer-Individual Domain</b>				
Rebelliousness	42.29	35.99	40.85	36.83
Early Initiation of ASB	29.63	21.31	39.44	31.18
Early Initiation of Drug Use	20.58	14.02	22.54	19.08
Attitudes Favorable to ASB	32.92	27.77	27.86	34.52
Attitudes Favorable to Drug Use	16.05	12.03	21.13	16.14
Intention to Use ATODs	23.83	17.75	16.31	14.23
Perceived Risk of Drug Use	28.44	19.95	20.42	21.23
Interaction with Antisocial Peers	45.83	31.80	39.44	42.22
Friend's Use of Drugs	21.99	15.73	16.90	19.50
Sensation Seeking	69.67	62.89	75.35	57.20
Rewards for ASB	35.44	23.01	30.50	25.92
Depressive Symptoms	49.58	39.37	48.94	43.02
Gang Involvement	17.55	11.58	9.15	11.83

**Table 9. Percentage of Students Reporting Protection**

Protective Factor	Middle School		High School	
	District 2003	State 2003	District 2003	State 2003
<b>Community Domain</b>				
Opportunities for Prosocial Involvement	65.52	73.18	74.64	73.53
Comm Rewards for Prosocial Involvement	55.81	62.24	56.74	62.74
<b>Family Domain</b>				
Family Attachment	65.57	69.28	64.29	63.04
Family Opportunities for Prosocial Involvement	65.03	72.84	64.54	66.01
Family Rewards for Prosocial Involvement	60.33	67.20	70.92	66.61
<b>School Domain</b>				
Opportunities for Prosocial Involvement	53.50	62.90	76.06	69.06
Rewards for Prosocial Involvement	52.48	59.23	62.41	60.39
<b>Peer-Individual Domain</b>				
Religiosity	69.75	76.98	73.94	79.08
Social Skills	75.00	77.70	74.47	72.75
Belief in the Moral Order	59.40	72.94	78.72	72.60

## Contacts for Prevention

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### Utah Department of Health

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### CSAP's WesternCAPT

Western Regional Center for the Advancement of Prevention Technology

Noreen Hammond Heid, M.P.A.

Utah Coordinator

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Utah Coordinator

668 So. 600 East

Salt Lake City, UT 84145-0500

(801) 532-6001

<http://www.unr.edu/Westcapt>

### CSAP Decision Support System

<http://www.PrevTech/preventiondss.org>

### Prevention Online

<http://www.health.org>

### Safe and Drug-Free Schools and Communities

U.S. Department of Education

Office of Elementary and Secondary Education

400 Maryland Ave., SW

Washington, DC 20202

202-260-2812

<http://www.ed.gov/offices/OESE/SDFS/>

### Center for Substance Abuse Prevention

[http://](http://www.samsha.gov/centers/csap/csap.html)

[www.samsha.gov/centers/csap/csap.html](http://www.samsha.gov/centers/csap/csap.html)

### Monitoring the Future

Survey Research Center

1355 Institute for Social Research

P.O. Box 1248

Ann Arbor, MI 48106

<http://monitoringthefuture.org>

### National Survey on Drug Use and Health

<http://www.samsha.gov/centers/clearinghouse/clearinghouses.html>

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